

WAYNE COUNTY YMCA
FAMILY FUN DAY REGISTRATION FORM FALL 2018

Name: _____ Gender: ____ DOB ___/___/___ Age: ____ Grade: ____ Member: ____

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Address: _____ Email: _____

Cell #: _____ Home#: _____ Work#: _____

Health Concerns: _____

Emergency Contact: _____ Relationship: _____ Phone#: _____

Agreement

1. I certify that the participant named above is in normal health and capable of safe participation in this YMCA Family Fun Day Program. The participant and/or parent agree to assume the risk of death or personal injury in this program and in whatever location or time it is held. The participant also acknowledges the extreme risk and danger inherent in the activity which includes; but is not limited to, the following: Injuries resulting from running, jumping, throwing, tripping, passing, dodging, ball collision, and all other activities and forms of motion associated with the sport.

2. I assume all risk(s) and hazard(s) incidental to the conduct of this program and release, discharge and covenant not to sue the YMCA or the instructors forever from liability for any and all loss or damage, personal injury, property damage or wrongful death whether caused by any negligence, either active or passive of the Y and the instructors, or otherwise.

3. **Medical Treatment Policy:** I agree that in the event of an emergency in which a parent, guardian, or emergency contact cannot be reached, that Emergency Medical Staff and the YMCA may take appropriate action to best serve the interest of my child. I understand in the case of an emergency situation, when medical attention is necessary, that the participant's parents or guardians will be responsible for any medical cost.

4. I agree to indemnify and hold the Y and instructors harmless from any damages or costs arising out of the participant's (child or myself) injury.

5. I support the YMCA Youth Sports philosophy, which is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement, and volunteer leadership. I agree to conduct myself with these principles in mind at all times and will not disrupt this or any other Y program or activity.

6. I give permission to the YMCA to use the photograph or likeness of my child for the purpose of educational or promotional matter. Yes or No

7. I am willing to participate as a coach or an assistant in this program. Yes or No

8. I would like to make a gift to help a child play Y Sports. I am adding \$ _____ to registration for the YMCA Strong Kids Scholarship Fund.

Parent/Guardian's Signature: _____ Date: _____

For Office Use Only: Paid: \$ _____ Payment Method: _____ Date: _____ Receipt #: _____ Staff: _____



**WAYNE COUNTY YMCA
FALL 2018
FAMILY FUN DAY**
Program Information Sheet



- **PROGRAM TIME:** Sunday 1:00-2:30 PM
- **LOCATION:** YMCA Gymnasium
- **SESSION:** Sunday November 4th and December 9th
- **PRE REGISTRATION IS REQUIRED**
- **PROGRAM COST:**
 - **COST/SESSION:** Member: Free
Nonmember: \$10/Session
- **DRESS CODE:** Comfortable clothes and gym shoes.
- **FOCUS:** Our New Family Fun Day program is designed to introduce Families to sports in a fun, exciting, and safe setting. Families will get the chance to play CornHole, Bowling, Kan Jam, Pickleball and jump in our Bouncy House.
- **CANCELLATION POLICY:** If there is severe weather in the area, or the possibility of severe weather, the Y may decide to cancel classes. We will attempt to call participants for cancellations, however, call 570-253-2083 if you are uncertain. If Wayne Highlands School District closes for the day or dismisses early, the program will be cancelled. Credit slips will be issued for classes missed for these purposes only.
- **SOCIAL MEDIA:** Like us on [facebook.com/ymcawayne](https://www.facebook.com/ymcawayne) and join the Wayne County YMCA Youth Programs group for news & updates!



WAYNE COUNTY YMCA
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(570) 253-2083
www.wcymca.com

**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**